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FEC

STATEMENT OF ORGANIZATION

RECEIVED 7

2012 NOV 15 AM 11: 28

FORM 1	ORGANIZATION					MITTINE
TUNIVI I					FECUMBAL CENTER	
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If over the li	typing, type nes.	12FE4M	5
NORTH C	AROL	INA REPUBL	IÇAN EX	ECUTIV	E BOA	RD
			07010	11111		
ADDRESS (number a	nd street)	P. O. BOX 6	6/313			
(Check if a is changed)		POMPANO	BEACH		FL	33066
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA		SS (Please provide only one USRepublic		tiveBoard	ds@gm	nail, com
is change			<u> </u>	1.		
COMMITTEE'S WEB	PAGE ADD	DRESS (URL)				
(Check if						
is change						
2. DATE 11	l [™] ′ 10	[*] ′ 2012 ′				
3. FEC IDENTIFIC	CATION NU	IMBER C				
4. IS THIS STATE	MENT 🔀	NEW (N) OR		MENDED (A)		
I certify that I have	examined th	is Statement and to the b	est of my knowle	dge and belief it	is true, corre	ct and complete.
Type or Print Name	of Treasurer	PETERSON	N TRUM	P		
Signature of Treasure	er	Peterson Tour			Date 1	1 ' 10 ' 2012 '
NOTE: Submission of		ous, or incomplete information				to the penalties of 2 U.S.C. §437g. S.
Office Use Only			Federa	rther Information co al Election Commissionee 800-424-9530		FEC FORM 1 (Revised 02/2009)